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I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING
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AND TRADEMARK OFFICE ON December 22, 2003.

Name of Person Making Transmission: Karen Cing-MaraSignature: Karen Cing-MaraDate of Signature: 12/22/03**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:
Maharaj Mukherjee

Examiner: Not yet assigned

Application No.: 10/604,585

Group Art Unit: 2184

Filed: July 31, 2003

For: **DYNAMICALLY
CONFIGURABLE FAULT
TOLERANCE IN AUTONOMIC
COMPUTING WITH MULTIPLE
SERVICE POINTS**

Date: December 19, 2003

PRELIMINARY AMENDMENT

The Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Sir:

Prior to examination on the merits, please amend the above-identified application as
follows:

FIS9-2003-0265-US1

-1-

Appln. No. 10/604,585

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BELOW:

Date of Transmission: 12/22/03

Name of Person

Making Transmission: Karen Grog-Mars

Signature: *Karen Grog-Mars* 12/22/03**OFFICIAL**

DOCUMENT(S) FAXED: (MARKED WITH X)

6 PAGES ATTACHED

Re Applic of	Maharaj Mukherjee
Docket No.	FIS920030265
Serial No.	10/604,585
Filing Date	07-31-03
Attorney	Jay H. Anderson

Attached: PRELIMINARY AMENDMENT

PLEASE DELIVER TO:

EXAMINER:

ART UNIT: 2184

PHONE NO:

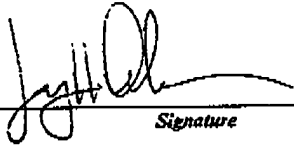

FAX NO: 703-872-9306

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**INTERNATIONAL BUSINESS
MACHINES CORPORATION**

Intellectual Property Law
East Fishkill Facility
2070 Route 52
Hopewell Junction
New York 12533-6531

Fax: 845-892-6363
Phone: 845-894-3667

AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. FIS920030265
Applicant(s): Maharaj Mukherjee			
Serial No. 10/604,585	Filing Date 07-31-03	Examiner Not available	Group Art Unit 2184
Invention: DYNAMICALLY CONFIGURABLE FAULT TOLERANCE IN AUTONOMIC COMPUTING WITH MULTIPLE SERVICE POINTS			
<u>TO THE COMMISSIONER FOR PATENTS:</u>			
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.			
CLAIMS AS AMENDED			
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT
TOTAL CLAIMS	10 -	20 =	0 x
INDEP. CLAIMS	2 -	3 =	0 x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>			\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT			\$0.00
 <div style="display: flex; justify-content: space-between;"><div><ul style="list-style-type: none"><input checked="" type="checkbox"/> No additional fee is required for amendment.<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0458<ul style="list-style-type: none"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: 22 December 2003</div></div> <div style="margin-top: 20px;"> _____ Signature</div> <div style="margin-top: 10px;">Jay H. Anderson Registration No. 38,371 Telephone No. 845-894-3667 Fax No. 845-892-6363</div>			
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